

SERIAL NUMBER <div style="text-align: center;">09/456,110</div>	FILING DATE <div style="text-align: center;">12/07/99</div>	CLASS <div style="text-align: center;">607</div>	GROUP ART UNIT <div style="text-align: center;">3737</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">001/001</div>
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APPLICANT

XIA LUO, LOS ANGELES, CA; SCOTT M. EVANS, SANTA ANA, CA; WILLIAM J. WORTHEN, COTO DE CAZA, CA.

  
  

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
 VERIFIED

\_\_\_\_\_

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***  
 VERIFIED

\_\_\_\_\_

  
  
  

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
 VERIFIED

\_\_\_\_\_

  
  
  

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/10/00 \*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ <div style="text-align: center; font-size: small;">                     Examiner's Initials _____ Initials _____                 </div>	STATE OR COUNTRY <div style="text-align: center;">CA</div>	SHEETS DRAWING <div style="text-align: center;">4</div>	TOTAL CLAIMS <div style="text-align: center;">44</div>	INDEPENDENT CLAIMS <div style="text-align: center;">2</div>
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ADDRESS

ARLYN L ALONZO ESQ  
 15770 LAGUNA CANYON ROAD SUITE 150  
 IRVINE CA 92618-3808

TITLE

METHOD AND SYSTEM FOR TREATING STROKE USING HYPOTHERMIA

FILING FEE RECEIVED <div style="text-align: center;">\$596</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="font-size: small;"> <input type="checkbox"/> All Fees  <input type="checkbox"/> 1.16 Fees (Filing)  <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)  <input type="checkbox"/> 1.18 Fees (Issue)  <input type="checkbox"/> Other _____  <input type="checkbox"/> Credit                 </div>
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## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5994

<b>SERIAL NUMBER</b> 09/456,110	<b>FILING DATE</b> 12/07/1999 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 001/001	
<b>APPLICANTS</b> XIA LUO, LOS ANGELES, CA; SCOTT M. EVANS, SANTA ANA, CA; WILLIAM J. WORTHEN, COTO DE CAZA, CA;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 01/10/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowance <input checked="" type="checkbox"/> No		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 44	<b>INDEPENDENT CLAIMS</b> 2
Verified and Acknowledged Examiner's Signature <i>Michael Hayes</i> Initials					
<b>ADDRESS</b> Arlyn L Alonzo Esq Alsus Corporations 15770 Laguna Canyon Road Suite 150 Irvine ,CA 92618					
<b>TITLE</b> METHOD AND SYSTEM FOR TREATING STROKE USING HYPOTHERMIA					
<b>FILING FEE RECEIVED</b> 632	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		